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**Model Partnership  
Agreement and Guarantee Resolution**

**AGREEMENT**

**WHEREAS,** \_\_\_\_\_ authorizes  
\_\_\_\_\_  
(Name of Partnership)  
\_\_\_\_\_ to seek a Certificate of Consent  
(Name of Applicant Employer)  
to Self-Insure workers' compensation liabilities in the State of California;

**NOW, THEREFORE, IT IS AGREED** that \_\_\_\_\_  
(Name of Partnership)  
will guarantee the payment of all workers' compensation liabilities incurred by any self-insured employer named above, resulting from  
operations in California as a permissibly self-insured; and

**IT IS FURTHER AGREED** that the \_\_\_\_\_  
(Sample Title-General Manager)  
or the \_\_\_\_\_ of this partnership is hereby  
(Sample Title-General Partner)  
severally authorized to sign the State of California form entitled Agreement of Assumption and guarantee of Workers' Compensation  
Liabilities on behalf of the \_\_\_\_\_  
(Name of Partnership)  
and be bound by all terms and conditions therein, including, but not limited to, terms specifying assumption of all employer(s)  
liability.

<b>Date:</b>	<b>By:</b>	_____ (Type Name and Title)
<b>Date:</b>	<b>By:</b>	_____ (Type Name and Title)
<b>Date:</b>	<b>By:</b>	_____ (Type Name and Title)

(The above signature(s) of the partner(s) must be acknowledged by a notary public similar to the example on the next page.)

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## Sample Notary Acknowledgement

State of \_\_\_\_\_

County of \_\_\_\_\_

On this \_\_\_\_\_ day of \_\_\_\_\_, in the year \_\_\_\_\_, before me  
personally appeared \_\_\_\_\_

(Insert the Name and Quality of the Officer)

personally known to me (or proved to me on the basis of satisfactory evidence) to be the person that executed this instrument on  
behalf of the partnership and acknowledged to me that the partnership executed it.

**Place Notary Stamp or Jurat Here**